Terminal Disclaimer to Obviate a Double Patenting Rejection Over a Prior Patent

Sunnyvale

addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Maria J. Sousa

City

Telephone - Direct Dial

Name (Print/Type)

Application Number 09/751,472
Confirmation Number 7176
Filing Date December 29, 2000
First Named Inventor Mody
Examiner Shay, David M.
Group Art 3735
Attorney Docket No. GUID-117 (FMT1P028)

94086

zip

Date

408-736-3564

N 3 1 2007 3		Attorney D	Oocket No.	GUID-117 (F	MT1P028)	
The coner, applica granted on the in 35 U.S.C. 19 Patent No. instant applica owned. This accessors or In making instant applica 156 and 173 of for failure to pastatutorily discreexamination	AFX, Inc. Intion hereby disclaims, except as provided below instant application, which would extend beyow 54 to 156 and 173, as presently shortened by 7,033,352. The owner lation shall be enforceable only for and during sugreement runs with any patent granted on the assigns. It above disclaimer, the owner does not discust that would extend to the expiration date of the prior patent, as presently shortened by any a maintenance fee, is held unenforceable, it laimed in whole or terminally disclaimed under certificate, is reissued, or is in any manner terminated by any terminal disclaimer.	of, of ow, the termind the expiration any terminal claim the terminal claim the terminal claim the full stating terminal claim the 37 CFR 1.3	100 inal part of the ation date of the disclaimer, of that any pathat it and the potential part of a sutory term as of disclaimer, in the disclaimer, in the disclaimer, in the disclaimer, and the disclaimer is the disclaimer is the disclaimer.	percent interest in statutory term of the full statutory term of the control of the full statutory patent granted defined in 35 U.S. the event that it late of competent jurison ims canceled by a	the any patent m defined the mmonly grantee, its on the C. 154 to er: expires diction , is a	
Check either box 1 or box 2, if appropriate. 1. For submissions on behalf of an organization (e.g., corporation, partnership, university, government agency, etc.), the undersigned is empowered to act on behalf of the organization. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge						
that willful false statements and the like so made are punishable to 1001 of Title 18 of the United States Code and that such willful fall application or any patent issued thereon.			·			
2. 🔽 Th	e undersigned is an attorney or agent of record.					
The Commissioner is authorized to charge a Terminal Disclaimer fee of and any other required fees including extensions of time to Deposit Account No. 50-2653. A duplicate copy is attached.						
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED						
Name (Print/Type) Alan W. Cannon			Registration No. 34,977			
Signature	Man		Date	1/29/07	<u> </u>	
Firm Name	Law Office of Alan W. Cannon	Address	942 Mesa Oa	K Court		

State

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope

Signature

408-736-3554

Page 1 of 1

California

CERTIFICATE OF MAILING OR TRANSMISSION

Facsimile